

**CONSENT OF NONRESIDENT FIDUCIARY  
FOR  
SERVICE OF PROCESS**

**USING THIS REVISABLE PDF FORM**

1. Copies  
Original - to court.
2. Prepared by fiduciary who is a nonresident of Virginia
3. Attachments - none.
4. Preparation details
  - a. This form is to be used to appoint a Virginia resident to receive service of process for an out-of-state fiduciary.
  - b. The form should include either an acknowledgment of the fiduciary's signature or the signature must be witnessed by the clerk.

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**DATA ELEMENTS**

1. Name of person whose estate is being managed by the fiduciary.
2. Court case number.
3. Name of fiduciary.
4. Date on which fiduciary qualified.
5. Check the applicable box to designate the type of fiduciary.
6. Name of person whose estate is being managed by the fiduciary.
7. Name of resident of Virginia who will accept service of process for the non-resident fiduciary.
8. Address of person named in Data Element No. 7.
9. Date signed by the fiduciary.
10. Signature of fiduciary.

To be completed by notary public, if applicable:

11. Date acknowledgment taken, if applicable. See Using this Revisable PDF Form, 4.b.
12. Printed name of fiduciary, if applicable. See Using this Revisable PDF Form, 4.b..
13. Signature of notary taking acknowledgment, if applicable. See Using this Revisable PDF Form, 4.b.
14. Date Notary Public's commission expires.

To be completed by clerk or deputy clerk, if applicable:

15. Signature of clerk or deputy clerk, if applicable. See Using this Revisable PDF Form, 4.b.

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COMMONWEALTH OF VIRGINIA

ESTATE OF **1** CASE NO. **2**

I, **3**, who qualified on the **4**  
day of \_\_\_\_\_, \_\_\_\_\_, as

- ☐ Personal Representative (defined in Virginia Code § 1-13.21)
- 5** ☐ Trustee under a Will or Inter Vivos Trust
- ☐ Guardian
- ☐ Conservator of an Incapacitated Person

of the Estate of **6**, hereby consent to and appoint **7**,  
whose address is **8**,  
and who is a resident of the Commonwealth of Virginia to accept service of process in any action  
against me in my fiduciary capacity, or any other notice with respect to administration of the estate in  
my charge.

This **9** day of \_\_\_\_\_, \_\_\_\_\_.

**10**

PERSONAL REPRESENTATIVE/TRUSTEE/GUARDIAN/CONSERVATOR

Commonwealth of Virginia

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of **11**,  
by **12**.

**13**

NOTARY PUBLIC (My Commission expires: **14**)

Witness:

**15**

CLERK/DEPUTY CLERK